

# Town of Northfield

69 Main Street | Northfield, Massachusetts 01360 | 413.498.2901

# **Public Records Request**

## **Requestor's Information**

| Name                                       |                        |   |  |  |  |
|--|------------------------|---|--|--|--|
| Full Address                               |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
| Telephone                                  |                        |   |  |  |  |
| Daytime                                    |                        |   |  |  |  |
| Evening                                    |                        |   |  |  |  |
| Fax (optional)                             |                        |   |  |  |  |
| Email Address (optional)                   |                        |   |  |  |  |
| <b>Description of Request</b>              |                        |   |  |  |  |
| (Attach additional                         |                        |   |  |  |  |
| documentation if necessary)                |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
| Date Stamp                                 | Date Request Received: | Date Request Passed to Custodian of the Records |  |  |  |
|  |                        | (if applicable):                                |  |  |  |
|  |                        |   |  |  |  |
|  |                        |   |  |  |  |
| Signature of Individual Receiving Request: |                        |   |  |  |  |
|  |                        |   |  |  |  |

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## **Public Records Request**

### **PUBLIC RECORDS REQUEST INFORMATION**

#### A. **Making the Request**

Requests for public records may be oral or written. An oral request, made in person (not by telephone) is valid under the Public Records Law. However, in order to appeal the custodian of the record's failure to provide copies or access to records, your original request, must be in writing. For this reason, it is advisable to put your request in writing. A written request that is clear and concise also helps the custodian of records to respond to your request in a timely and efficient manner. The completion or submission of this form is not required under the law.

#### В. The Process

All requests for public records will be honored in accordance with the Massachusetts Public Records Law. Town staff and/or public officials will respond as soon as practicable and within ten days of the request. Staff and/or public officials will provide a written good faith estimate for the cost of complying with a request where the total cost is expected to exceed ten dollars (\$10.00). This is to assist the requester in determining whether to cancel or limit the extent of the request. Prepayment is required prior to beginning the research, compilation, and copying process. Any denial of access to departmental records will detail the specific legal basis for withholding the requested materials in accordance with the Massachusetts Public Records Law.

#### C. **Fees**

The following fees may be charged for complying with a public records request in accordance with the Massachusetts Public Records Law:

- 1. Time to search for the records, photocopy the records, and re-file the records by (prorated hourly wage of the lowest paid employee capable of performing the task)
- 2. Per page charge for standard single-sided copies \$.20 per page; \$.40 for double-sided page and \$0.40 for 11x17 sheets.
- 3. Electronic files and computer records in other formats shall be based on the cost for time and materials necessary.
- 4. An outside source may be used for requests for complete files or full-sized plans at the direct expense of the requestor.
- 5. For examination of records the custodian of the records may charge the search and segregation charge described above.

All fees must be paid in full prior to receipt of copies. Payments must be cash or check only. Checks shall be made out to Town of Northfield.



## 69 Main Street | Northfield, Massachusetts 01360 | 413.498.2901

# **Public Records Request**

## **PUBLIC RECORDS REQUEST RECEIPT**

## **Requestor's Information**

| Name  |   |             |             |   |
|---|---|-------------|-------------|---|
| Full Address  |   |             |             |   |
| Telephone   |   |             |             |   |
| Daytime   |   |             |             |   |
| Evening Fax   |   |             |             |   |
| rdx   |   |             |             |   |
| Email Address   |   |             |             |   |
| Description of<br>Request<br>(Attach additional<br>documentation if<br>necessary) |   |             |             |   |
|   | Payment Information                           |             |             |   |
| Cost/Fee for Providing Records  | Copies  | No.         | Cost        |   |
|   | A. No. of single-sided pages@ \$.20 per page: |             | \$          |   |
|   | B. No. of double sided pages @ \$.40 per page | e:          | \$          |   |
|   | C. No. of 11x17 pages @\$.40 per page:        |             | \$          | - |
|   | Other   | \$          |             |   |
|   | Total Charge                                  | \$          |             |   |
|   | dividual Descrition Descrit                   | a Davis     | Description |   |
| Signature of Individual Receiving Payment Da                                      |   | e Payment I | Received    |   |